

DEPT. OF PARKS & RECREATION
Donald McKay, Director



May 2014

Dear Parent/Guardian:

Elwood Park is a good site for the Playground Program because of the many resources available such as fields, playground, pavilion, tennis, volleyball, and bocce courts. This will provide your child with many opportunities to participate in arts & crafts, games, special events, and organized sports. It also provides a unique obstacle, the weather. On mornings where weather may be a factor, please call 351-3101 after 8:30 AM to hear a recorded message as to whether or not the program will be held. Please do not call the town questioning the decision. Decisions will be made to ensure the safety of your child.

If the program is cancelled for more than two days throughout the six-week program the town will provide you with a credit on your account. This will begin with the third cancellation. This credit may be applied to any program the town offers.

If the weather should become inclement during the program please make arrangements to pick up your child as soon as possible. The park does have a pavilion big enough to shelter all the children. Please be aware of the weather should there be reports of impending thunderstorms or heavy rain.

It should be noted that Elwood Park is open to the public and is enjoyed by members of our community. The program will be directed by an experienced teacher and will be assisted by a staff that includes many returning counselors as well as counselors-in-training. You can be assured that the staff will be diligent in keeping your child safe as well as engaged throughout the six week program.

Here's looking forward to a safe, fun-filled summer!

Sincerely,

Ken Barker
Playground Coordinator

TOWN OF HUNTINGTON
DEPARTMENT OF PARKS & RECREATION

PLAYGROUND/PRE-SCHOOL PROGRAM
MEDICAL FORM

Return to Teacher/Director on first day of program

Name of Child _____ Location _____

Address _____
Street Town Zip

Grade as of 9/14 _____ Age _____ Height _____ Weight _____

Is the child taking any medications? Yes ___ No ___ If so, please state reason:

Does the child have any health problems that might affect his or her participation?
Yes ___ No ___ If so, please explain:

Does the child have any allergies? Yes ___ No ___ If so, what are they?

If your child has special needs other than previously mentioned, please speak to the
Playground Director or Pre-School Teacher.

It should be noted that the Program does not employ a nurse; therefore, medications must
be given prior to attending the program or they must be self-administered.

The Town of Huntington does not carry medical insurance. This is the responsibility of
the parent or guardian.

**TOWN OF HUNTINGTON
DEPARTMENT OF PARKS & RECREATION**

**PLAYGROUND/PRE-SCHOOL PROGRAM
EMERGENCY FORM**

Return to Teacher/Director on first day of program

Name of Child _____ Location _____

I. Name _____

Mother or Guardian

Home Address _____ Phone # _____

Business Address _____ Phone # _____

If no phone in the home, where can Mother/Guardian be reached: Phone # _____

II.
Name _____

Father or Guardian

Home Address _____ Phone # _____

Business Address _____ Phone # _____

If no phone in the home, where can Father/Guardian be reached: Phone # _____

III. If staff cannot get in touch with either of the above, name a friend or relative who may be called upon if child is sick at Camp.

Name _____ Address _____ Phone _____

If none of the above can be reached by phone WHAT DO YOU WISH THE STAFF TO DO IN CASE THE CHILD IS SICK OR INJURED? _____

It is understood that in the final disposition of an emergency case, the judgment of the Program authorities will prevail. The recommendation of the parent, as indicated above, will be respected as far as possible.

IV. If at any time the above information must be changed, I will notify the Camp in writing.

V. Please list the individuals, other than parent authorized to pick up your child:

Name _____ Phone # _____ Relationship _____

Name _____ Phone # _____ Relationship _____

A parent/guardian must provide a written note to the Program Director if someone other than those listed above is picking up the child.

Signature of Parent or Guardian